Effective December 8, 2004									10-578532			
		CLAIMS A	S FILED - PART I		(Column 2)			SMALL ENT		OR	OTHER SMALL E	
U.S. NATIONAL STAGE FEES			. (Cotumn 1)			Column 2)		RATE	FEE		RATE	FEE
BASIC FEE			SMALL ENT. = \$ 150		LARG	E ENT. = \$ 300		BASIC FEE	ונומו	OR	BASIC FEE	
EXAMINATION FEE			Satisfics POT Article \$5(1)- (4) • 8 60 / \$ 100			her situations =		EXAM. FEE			EXAM FEE	
SEARCH FEE			U.S. is ISA = \$50/\$100 ALL other countries = \$ 200/\$400		All other elizations = 8 250 / 8 500			SEARCH FEE	3411)		SEARCH FEE	
FEE FOR EXTRA SPEC, PG9.			minus 100 =		·/ 50 ±		ı	X\$125=	V CATAV		X \$ 260 =	
TOTAL CHARGEABLE CLAIMS			12 minus 20 =		•			X \$ 25 =		OR	X \$ 50 =	
INDEPENDENT CLAIMS			2 - Minus 3 □		•			X \$ 100 =		OR	X\$ 200 =	
MUL	TIPLE DEPEN	DENT CLAIM PRI	SENT					+\$ 180 =	·	OR-	+ \$ 360 =	
If the difference in column 1 is less than zero, enter "0" in column 2							•	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II 5-2-06 (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT	·	HIGH NUMI PREVIO - 'PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	٠	RATE .	ADDI- TIONAL FEE
	Total	. 15	Minus	" 20	Ć			X \$ 25 =		OR	X \$ 50 =	٦.
	Independent	· 2 ·	Minus	 3		•		X \$ 100 =	Ø	OR	X \$ 200 =	P
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+\$ 180 =		OR	+ \$ 360 =	
•			•		•			TOTAL ADDIT. FEE	<u> </u>	OR	YOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
81		CLASAS REMARKING AFTER AMENDMENT		HIGH NUMI PREVIO PAID I	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	•	Minus	••		÷	•	X \$ 25 =		OR	X \$ 50 =	
	independent.	•	Minus	***	•	•	. [X \$ 100 =	N	OR	X \$ 200 =	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\cdot	+ \$ 180 =		OR	+ \$ 360 =	
·								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
* If the entry in column 1 is loss then the entry in column 2, write "O" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".												

. Application or Docket Number